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|  | •  | ·   | Application or Docket Number |   |              |                  |         |                  |          |                        |        |                     |                        |
|--|--|---|------------------------------|---|--------------|------------------|---------|------------------|----------|------------------------|--------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001               |  |   |                              |   |              |                  |         |                  |          |                        |        |                     | 1425                   |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                       |  |   |                              |   |              |                  |         |                  | EN       | חווי                   | OR     | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS   |  |   | 90                           |   |              |                  | 1       | RATE             | _        | FEE                    |        | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                 |   | NUMBER EXTRA |                  |         | BASIC I          | ŧΕ       | 370.00                 | OR     | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 80 minus 20=                 |   | . 60         |                  |         | X\$ 9=           |          |                        | OR     | X\$18=              | 1050                   |
| INDEPENDENT CLAIMS   |  |   | 7 minus 3 = *                |   |              | / X42=           |         |                  | .        |                        | OR     | X84=                | 236                    |
| MULTIPLE DEPENDENT CLAIM P   |  |   | RESENT                       |   |              |                  | +140=   |                  |          |                        | OR     | +280=               | 770                    |
| * If the difference in column 1 is less than zero, enter "0" in column 2             |  |   |                              |   |              |                  |         |                  | _        |                        | OR     | TOTAL               | 0,00                   |
| TOTAL OR TOTAL OTHER THAN  (Column 1) (Column 3) SMALL ENTITY OR SMALL ENTITY        |  |   |                              |   |              |                  |         |                  |          |                        |        |                     | 4                      |
| آے   | -10-65   | ., .                                      | (Column 3)                   | ١.  | SMA          | LE               | NTITY   | OR               | SMALL    |                        |        |                     |                        |
| <b>AMENDMENT A</b>   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                              | HIGHE<br>NUMB<br>PREVIOU<br>PAID F            | ER<br>USLY   | PRESENT<br>EXTRA |         | RATE             |          | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | . 55                                      | Minus •                      | - 8   | 0            | - P,             |         | X\$ 9:           | -        | $\bigvee$              | OR     | X\$18=              | i                      |
|  | Independent                                    | • 7                                       |                              | J   |              | <i>- (2)</i>     |         | X42=             | .        | /                      | OR     | X84= (              | T                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /                                     |  |   |                              |   |              |                  |         |                  | <u>.</u> |                        | OR     | +280=               |                        |
|  |  |   |                              |   |              |                  |         |                  | AL.      |                        |        | TOTAL               |                        |
| 6-   | 16-05  | (Column 1)                                |                              | (Colum  | ຄ 2)         | (Column 3)       |         | ADDIT. F         | EE L     |                        |        | ADDIT. FEE          |                        |
| AMENDMENT B  |  | CLAIMS REMAINING AFTER AMENDMENT          |                              | HIGHE<br>NUMB<br>PREVIOU<br>PAID F            | ER           | PRESENT<br>EXTRA | 11      | ŖATE             |          | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL        |
|  | Total  | . 55                                      | Minus :                      | 8   |              | . —              | 11      | X\$ 9:           | 1        | FEE                    | OR     | X\$18=              | FEE                    |
|  | Independent                                    | • 7                                       |                              | 7   |              | • /              | ]       | X42=             | .        |                        | OR     | X84=                |                        |
| L  | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEPEN                | NDENT (                                       | CLAIM        |                  | ]       | +140-            | 7        |                        |        | +280=               |                        |
| Tol  |  |   |                              |   |              |                  |         |                  |          |                        | OR     | 77071               |                        |
|  |  |   |                              |   |              |                  |         | ADDIT. FI        | ŒL       |                        | OH .   | ADDIT. FEE          |                        |
|  |  | (Column 1)<br>CLAIMS                      |                              | (Colum  |              | (Column 3)       | ١.      |                  |          |                        |        |                     | <u> </u>               |
| <b>AMENDMENT C</b>   |  | REMAINING<br>AFTER<br>AMENDMENT           |                              | NUMBI<br>PREVIOU<br>PAID FI                   | JSLY         | PRESENT<br>EXTRA |         | RATE             |          | ADDI-<br>TONAL<br>FEE  |        | RATE                | ADDI-<br>TIONAL<br>FEE |
| MDN  | Total  | •   | Minus •                      |   |              | =                | $\prod$ | X\$ 9=           | <u>.</u> |                        | OR     | X\$18=              | 1                      |
| AME  | Independent                                    | •   |                              | 10000   |              | •                | 11      | X42=             | 7        |                        | OR     | X84=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                              |   |              |                  |         |                  | 1        |                        |        | 000                 |                        |
| * If the entry in column 1 is less than the entry in column 2, write "" in column 3. |  |   |                              |   |              |                  |         |                  |          |                        | OR     | +280=               |                        |
| ** [   | I the "Highest Nu                              | mber Previously Pa<br>mber Previously Pa  | ed For IN THIS S             | PACE &  | less than    | 20, enter "20    | )." A   | TOTA<br>DOIT. FE |          |                        | OR     | TOTAL<br>ADDIT. FEE |                        |
|  | The Highest Nur                                | ber Previously Pai                        | d For (Total or Inc          | tepender                                      | n) is the    | highest numb     | er fou  | nd in the        | appr     | opriate box            | in col | umn 1.              |                        |
| FORM   | PTO-875 (Res. B)                               | 01)                                       | <del></del>                  | <u>,                                     </u> |              | M2-124 / SDH47   | Pate    | rd and Tre       | dema     | rt Office, U.          | 8. DEF | ARTMENT OF          | COMMERCE               |